IFD CAN 509

## **NEVADA FINANCIAL DISCLOSURE STATEMENT**

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(Attach additional sheets if necessary.)

FILED

NAME <u>Henneth</u> N. Elgan MAILING ADDRESS <u>R.O. Box (14, 15)</u> CITY, STATE, ZIP <u>A Jen</u> DV TELEPHONE 725-572-3281			NCE IN NEVADA	RALDA CO	ICTEDED	2: 34 ) TO LERA
List all public offices for which this financial disclosure  Public Office  Esm. Co. Sheriff	Annual Compensation  \$ 56572.56	equired (NRS 2)  Term or Date Appointed	81.571, Subsection ANNUAL all elected and appointed public officers (no later than Jan. 15 each year)  NRS 281.59(1)(b) 281.58(1)(b)	c 1(g)]:  CANDIDATE (no later than the 10th day after the last day to qualify as a candidate)  NRS 281.561(1)(a)	APPOIN to fill unexy of an ele appointe offic (within 3	pired term acted or d public cer (0 days)
List all general sources of income for you and member Esm. Co. Sheriff Esm. Co. Rentals	-	nar ·	·-····································	RS 281.571, S	Self H	n 1(b)]: lousehold Member
List each creditor to whom you or a member of your lor deed of trust on real property which is not required vehicle for personal use was retained by seller] [NRS 2	to be listed bel	ow, and (2) de	ore [except (1) o	ecurity inter	est in a	rtgage motor ousehold Member

			Househol
Rentals			Self Member
Resolution			
		S PARALLE S S S S S S S S S S S S S S S S S S	∐
			∐
			0 0
List specific location and particular	use of all real estate (other than	personal residence): (1) in which	n you or a member of
your household has a legal or bene state or an adjacent state (NRS 281.5	571. Subsection 1(c)l:		• •
Lighway 264 MM 8	Location	Particular L	Jse
Harriery 1167 1919 0 1	100		
	***************************************		
	· · · · · · · · · · · · · · · · · · ·		
List the identity of donor and value	of each gift received in excess	of an aggregate value of \$200 fro	om a donor
during the preceding taxable year (a consanguinity or affinity; and (2) cer	except (1) a gift received from a remonial gifts received for a birth	person who is related to you with	in the third degree of
occasion if the donor does not have	a substantial interest in your legi	islative, administrative, or political	action]
NRS 281.571, Subsection 1(e)]:	Donor		Value of Gift
			\$
	~~~~~		
			\$
			\$ \$ \$
			\$ \$ \$
THE INFORMATION I HAVE PROV	none		\$ \$ \$
THE INFORMATION I HAVE PROV	none		\$ \$
THE INFORMATION I HAVE PROV	/IDED HEREIN IS ACCURATE A	AND COMPLETE.	7

List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is